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JUN 30 2011

DEPARTMENT OF ECOLOGY - CENTRAL REGIONAL OFFICE



# STATE OF WASHINGTON APPLICATION TO ENTER A WATER RIGHT INTO THE TRUST WATER RIGHT PROGRAM

NOTE: THIS FORM IS ONLY TO BE USED FOR THE  
ACQUISITION OF WATER INTO THE TRUST WATER RIGHT PROGRAM

(Check all that apply.)

- ☐ Lease  
☐ Purchase  
☒ Donation  
☐ Other  
Explain: \_\_\_\_\_

☐ Portion of the identified existing water right

IF FOR SEASONAL OR TEMPORARY, START DATE: June 30, 2011

END DATE : 30 days after written

notice to Ecology of intent to remove right from trust

FOR OFFICE USE ONLY	
FILE No. <u>CS4-WRC115861-03</u>	WRIA <u>48</u>
DATE ACCEPTED <u>07/14/11</u>	BY <u>[Signature]</u>
FEE \$ <u>0</u>	REC'D <u>06/30/2011</u>
CHECK No. <u>[Signature]</u>	
SEPA: <input type="checkbox"/> Exempt <input type="checkbox"/> Not exempt	

\*\*IF MORE SPACE IS NEEDED, ATTACH ADDITIONAL SHEETS (PLEASE PRINT OR TYPE CLEARLY)\*\*

## 1. Applicant Information:

APPLICANT/BUSINESS NAME <b>Arrowleaf Homeowners Association</b>	PHONE NO. ( )	FAX NO. ( )
ADDRESS <b>14301 3<sup>rd</sup> Avenue NW</b>		
CITY <b>Seattle</b>	STATE <b>WA</b>	ZIP CODE <b>98177-3925</b>

CONTACT NAME (IF DIFFERENT FROM ABOVE) <b>Sarah E. Mack</b>	PHONE NO. <b>(206) 493-2315</b>	FAX NO. <b>(206) 493-2310</b>
ADDRESS <b>Tupper Mack Jensen Wells PLLC, 2025 1<sup>st</sup> Avenue, Suite 1100</b>		
CITY <b>Seattle</b>	STATE <b>WA</b>	ZIP CODE <b>98121</b>

## 2. Water Right Information:

WATER RIGHT OR CLAIM NUMBER <b>CG4-WRC115861@2</b>	RECORDED NAME(S) <b>Arrowleaf Homeowners Association</b>
DO YOU OWN THE RIGHT? x YES <input type="checkbox"/> NO IF NO, PROVIDE OWNER(S) NAME and ADDRESS:	
HAS THE WATER BEEN PUT TO BENEFICIAL USE IN THE LAST FIVE (5) YEARS? x YES <input type="checkbox"/> NO	
ARE WATER DIVERSIONS/WITHDRAWALS OF THIS WATER RIGHT METERED OR MEASURED? x YES <input type="checkbox"/> NO	
IMPORTANT! PROVIDE INFORMATION SHOWING THE EXTENT OF WATER USE FOR EACH OF THE LAST FIVE YEARS	

Please attach copies of any documentation that demonstrates consistent, historical use of water since the right was established. Also, if you have a water system plan or conservation plan, please include a copy with your application.

<b>CR06 CS4-WRC 115861-02</b> <b>DATED 5/2003</b>	
FOR OFFICE USE ONLY	
WATER RIGHT NO. _____	FILE (contract) NO. _____

**CS4-WRC 115861-03**



**3. How is Water to be Made Available for Trust?**

<input type="checkbox"/> Alteration in method of diversion	<input type="checkbox"/> Alteration in water use/ irrigated acreage
<input type="checkbox"/> Alteration in method of delivery/conveyance	<input type="checkbox"/> Nonuse of one or more points of diversion
<input type="checkbox"/> Alteration in method of water application	<input checked="" type="checkbox"/> Nonuse of all or a portion of the named water right
<input type="checkbox"/> Alteration in type of crop	<input type="checkbox"/> Other, Explain below:
Name of funding source(s):	

**WATER RIGHT DESCRIPTION \*****4. Point(s) of Diversion/Withdrawal:****A. Existing**

SOURCE	NO.	1/4	1/4	SEC.	TWP.	RGE.	PARCEL #	WELL TAG #
4 wells								
(see attachment)								

Please include copies of all water well reports involved with this proposal. Also, if you know the distances from the nearest section corner to the above point(s) of diversion/withdrawal, please include that information in Item No. 6 (remarks) or as an attachment.

**5. Purpose of Use:****A. Existing Use of the Water Right**

PURPOSE OF USE	GPM or CFS	ACRE-FT/YR	PERIOD OF USE
Irrigation of 7 acres	72.5 gpm	24.38	May 1 – Oct. 31

**B. Proposed Purpose of the Trust Water Right:**

DESCRIBE THE PURPOSE(S) OF USE DURING THE PERIOD OF TRUST:	
PURPOSE OF USE	ACRE-FEET/YR
Instream flows	24.38

**6. Place of Use:****A. Existing:**

LEGAL DESCRIPTION OF LANDS WHERE WATER IS PRESENTLY USED:							
See attachment							
1/4	1/4	SEC.	TWP.	RGE.	COUNTY	PARCEL #	# OF ACRES
DO YOU OWN ALL THE LANDS IN THE EXISTING PLACE OF USE? <input type="checkbox"/> YES <input type="checkbox"/> NO – IF NO, PROVIDE OWNER(S) NAME:							

\* If additional space is needed, please continue on the form: Attachment for Application to Enter a Water Right into the Trust Water Right Program.



6. Place of Use (continued)

B. Proposed:

IDENTIFY THE WATER BODY TO BE BENEFITED OR OTHER PLACE TO BE BENEFITED
Methow River

7. Remarks and Other Relevant Information:

Existing authorized diversion points are located as follows:
(1) 1330 feet N and 380 feet W from the SE corner of Section 22
(2) 200 feet S and 2050 feet W from the NE corner of Section 16
(3) 1640 feet N and 2250 feet E from the SW corner of Section 15
(4) 1770 feet S and 2020 feet W from the NE corner of Section 22

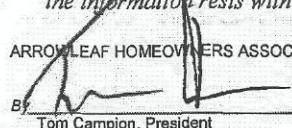
Certain applications may incur a Real Estate Excise Tax liability for the seller of the water rights. The Department of Revenue has requested notification of potential taxable water right related actions and therefore may be provided with a copy of this request.

Please contact the State Department of Revenue for further information. The phone number is (360) 570-3265. The address is: Department of Revenue, Real Estate Excise Tax, PO Box 47477, Olympia, WA 98504-7477.

8. Signatures:

*I certify that the information above is true and accurate to the best of my knowledge. I hereby grant staff from the Department of Ecology access to the above site(s) for inspection and monitoring purposes. If assisted in the preparation of the above application, I understand that all responsibility for the accuracy of the information rests with me.*

ARROWLEAF HOMEOWNERS ASSOCIATION

By   
Tom Campion, President  
(Applicant and Water Right Holder)

6/22/11  
(Date)

John and Barbara O'Halloran

\_\_\_\_\_  
(Date)

Tom and Iris Wagner

\_\_\_\_\_  
(Date)

Tom and Sonya Campion

6/22/11  
(Date)

Barbara's Legacy, LLC by Jacob Engelstein, its Managing Member

\_\_\_\_\_  
(Date)

All Long

\_\_\_\_\_  
(Date)

(Land Owners of Existing Place of Use)

**IMPORTANT! APPLICATION FILING INFORMATION IS PROVIDED ON THE NEXT PAGE.**

**WE ARE RETURNING YOUR APPLICATION FOR THE FOLLOWING REASON(S):**

☐ ADDITIONAL SIGNATURES REQUIRED ☐ SECTION \_\_\_\_\_ IS INCOMPLETE

☐ OTHER/EXPLANATION: \_\_\_\_\_

STAFF: \_\_\_\_\_ DATE: \_\_\_\_/\_\_\_\_/\_\_\_\_



**6. Place of Use (continued)**

**B. Proposed:**

CHECK THE WATER BODY TO BE DIVERTED OR OTHER PLACE TO BE DIVERTED
Methow River

**7. Remarks and Other Relevant Information:**

Existing authorized diversion points are located as follows:
(1) 1330 feet N and 380 feet W from the SE corner of Section 22
(2) 200 feet S and 2050 feet W from the NE corner of Section 18
(3) 1640 feet N and 2250 feet E from the SW corner of Section 15
(4) 1770 feet S and 2020 feet W from the NE corner of Section 22

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**ARROWLEAF HOMEOWNERS ASSOCIATION**

By Tom Campbell, President  
(Applicant and Water Right Holder)

(Date)

John and Barbara O'Halloran

6/29/2011  
(Date)

Ted and Ila Wagner

(Date)

Tom and Beryl Campbell

(Date)

Barbara's Legacy, LLC by Jacob Engelstad, its Managing Member

(Date)

Al Lang

(Date)

(Land Owners of Existing Place of Use)

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- ☐ OTHER EXPLANATION: \_\_\_\_\_
- STAFF: \_\_\_\_\_ DATE: \_\_\_\_\_



**6. Place of Use (continued)****B. Proposed:**

IDENTIFY THE WATER BODY TO BE BENEFITED OR OTHER PLACE TO BE BENEFITED
Methow River

**7. Remarks and Other Relevant Information:**

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ARROWLEAF HOMEOWNERS ASSOCIATION

By \_\_\_\_\_  
John O'Halloran, Chair, Water Committee  
(Applicant and Water Right Holder)

\_\_\_\_\_  
(Date)

John and Barbara O'Halloran  
*(Tris) Wagner*  
Tris and Iris Wagner

\_\_\_\_\_  
(Date)  
6, 29, 11  
(Date)

Tom and Sonya Campion

\_\_\_\_\_  
(Date)

Barbara's Legacy, LLC by Jacob Engelstein, its Managing Member

\_\_\_\_\_  
(Date)

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(Date)

(Land Owners of Existing Place of Use)

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STAFF: \_\_\_\_\_ DATE: \_\_\_\_/\_\_\_\_/\_\_\_\_



**6. Place of Use (continued)**

**B. Proposed:**

IDENTIFY THE WATER BODY TO BE BENEFITED OR OTHER PLACE TO BE BENEFITED
Methow River

**7. Remarks and Other Relevant Information:**

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(Applicant and Water Right Holder)

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(Date)

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\_\_\_\_\_  
(Date)

\_\_\_\_\_  
Ted and Iris Wagner

\_\_\_\_\_  
(Date)

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Tom and Sonya Campion

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(Date)

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Barbara's Legacy, LLC by Jacob Engelstein, its Managing Member

\_\_\_\_\_  
6/29/11  
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STAFF: \_\_\_\_\_ DATE: \_\_\_\_/\_\_\_\_/\_\_\_\_



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(Date)

Ted and Iris Wagner

\_\_\_\_\_  
(Date)

Tom and Sonya Campion

\_\_\_\_\_  
(Date)

Barbara's Legacy LLC by Jacob Engelstein, its Managing Member

\_\_\_\_\_  
(Date)

Ali Long

06/27/11  
(Date)

(Land Owners of Existing Place of Use)

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STAFF: \_\_\_\_\_ DATE: \_\_\_\_/\_\_\_\_/\_\_\_\_



**ATTACHMENT FOR  
APPLICATION TO ENTER A WATER RIGHT INTO  
THE TRUST WATER RIGHT PROGRAM**

**Point(s) of Diversion/Withdrawal - ☒ Existing ☐ Proposed:**

SOURCE	NO.	¼	¼	SEC.	TWP.	RGE.	PARCEL #	WELL TAG #
Well		NE	SE	22	36	19E		ACL684
Well		NW	NE	16	36	19E	Log ID 139410	unknown
Well		NE	SW	15	36	19E	Log ID 296337	unknown
Well		SW	NE	22	36	19E	Log ID 144192	unknown

**B. Proposed Purpose of the Trust Water Right**

DESCRIBE THE PURPOSE(S) OF USE DURING THE PERIOD OF TRUST:	
PURPOSE OF USE	ACRE-FEET/YR

**Place of Use - ☒ Existing:**

LEGAL DESCRIPTION OF LANDS							
Within HES 89, 90, 91, 92, 93, 94, and 198; described as being within: NE¼ Section 8; SW¼NW¼, SW¼, SW¼SW¼ Section 9; SW¼SW¼ Section 10; NW¼, SW¼NE¼, SW¼, SE¼ Section 15; NE¼NW¼, NE¼, NE¼SE¼ Section 16; NW¼, NE¼, SE¼ Section 22; SW¼NW¼, SW¼ Section 23; NW¼NW¼ Section 26; and the NE¼ Section 27, all in T.36 N., R. 19 E.W.M.							
The Lots are specifically described as: Lot 1A being a portion of HES 89 and 90 (98008-90018); Lot 1B being a portion of HES 90 and 91 (98009-00025); Lot 2 being a portion of HES 91 and 92 (98009-10009); Lot 3 being a portion of HES 92 and 93 (98009-20010); Lot 4 being a portion of HES 93 and 94 (98009-30009); Lot 5 being a portion of HES 94 and 198 (98009-40013); and the Wildlife Sanctuary Parcel being a portion of HES 198 (98019-80010), all as shown on Record of Survey recorded under Auditors File No. 835628 in book "K", on Page 261, on December 5, 1995, records of Okanogan County, Washington.							
¼	¼	SEC.	TWP.	RGE.	COUNTY	PARCEL #	# OF ACRES
DO YOU OWN ALL THE LANDS IN ABOVE PLACE OF USE? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO - IF NO, PROVIDE OWNER(S) NAME: John and Barbara O'Halloran; Ted and Iris Wagner; Tom and Sonya Campion; Ali Long; Barbara's Legacy, LLC							